

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL



Application Number	10/761,627
Filing Date	January 20, 2004
First Named Inventor	Richard B. FOX
Group Art Unit	3617
Examiner Name	McCARRY Jr., Robert J.
Attorney Docket No.	A-68881-1/ENB (468878-4)

MAIL STOP RCE

Commissioner of Patents, P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-captioned application.

1. Submission required under 37 C.F.R. § 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other:
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (including Form PTO-1449 and References)
- iv. ☐ Other:

05/31/2006 MGE BREM1 00000007 10761627

01 FC:2801
02 FC:2253

395.00 OP
510.00 OP

2. Miscellaneous

- a. ☐ Suspension of action on the above-captioned application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed three months; Fee under 37 C.F.R. § 1.17(i) required.)
- b. ☐ Other:

3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a. ☒ The Fees are calculated as follows:
- | | AMOUNT | <input type="checkbox"/> Large Entity | <input checked="" type="checkbox"/> Small Entity |
|--|-----------|---|--|
| i. <input checked="" type="checkbox"/> RCE BASIC FEE | \$ 395.00 | \$ 790.00 | \$ 395.00 |
| ii. <input checked="" type="checkbox"/> EXTENSION FEES | \$ 510.00 | One-Month \$ 120.00
Two-Month 450.00
Three-Month 1,020.00 | \$ 60.00
225.00
510.00 |
| iii. <input type="checkbox"/> OTHER: | \$ \$ | | |
- b. ☒ Check in the amount of **\$905** is enclosed. The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to **Deposit Account No. 50-2319**
- c. ☒ The Commissioner is hereby authorized to charge the fees as indicated above, charge any variance or credit any overpayments, to **Deposit Account No. 50-2319 (A-68881-1/ENB(468878-4))**.

SUBMITTED BY

Typed or Printed Name **Edward N. Bachand**

Signature

Complete (if applicable)

Registration No. **37,085**

Date: **May 25, 2006**